

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

7/14/71 1/10

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
1	1/15/2002
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36	✓ ✓ A
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41	✓ ✓ A
42	N ✓ A
43	N ✓
44	✓ ✓
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50	✓ ✓ A

Claim	Date
51	✓
52	✓
53	N ✓
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59	M ✓
60	✓
61	✓ A
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63	✓ A
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87	✓
88	✓ A
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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